

# **INTERNAL REVENUE SERVICE HEALTH COVERAGE TAX CREDIT**

## **IB13 (Exception Report) Handling Process for State Workforce Agencies**

*Updated July 2008*

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## Executive Summary

This document provides an overview of the Health Coverage Tax Credit (HCTC) IB13 exception report process. An IB13 is an exception (error) report generated by the HCTC system if, during the processing of a state's eligibility file transmission, there are any errors with the file format or with an individual record. This overview outlines:

- Specific guidelines for how data is to be transmitted to the HCTC Program
- Examples as to how this data may result in the generation of an IB13 exception (error) report
- Steps necessary for State Workforce Agencies (SWA) to remedy errors and retransmit the data

SWAs should use the guidelines in this document to code their systems to ensure that participants' eligibility records can be correctly loaded into the HCTC system. By adhering to these standards, SWAs will improve the quality of the data transmitted to the HCTC Program and better assist their HCTC Participants by ensuring that the Participants are efficiently and effectively enrolled and administered in the Program.

The HCTC Program relies on the states and the PBGC to provide accurate information for potentially eligible individuals. The submission of inaccurate information and eligibility data negatively impacts our customers and creates the potential for serious Program integrity issues.

## ICON Transmission Process

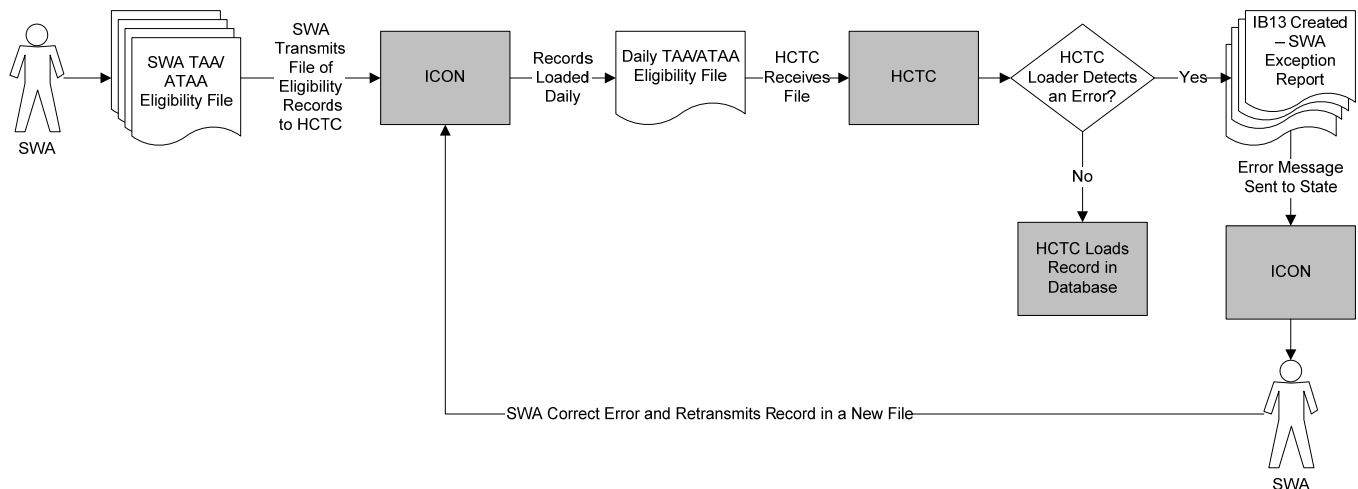
SWAs use the ICON Interface to transmit data to HCTC:

- On a daily basis, SWAs transmit files containing unique eligibility records for TAA and ATAA individuals. When individuals receive income support payments from an SWA (such as an unemployment compensation check or trade readjustment allowances (TRA)), the SWA notifies the HCTC Program of their monthly eligibility by transmitting an ICON record.
- As needed, SWAs transmit files containing records backdating or revoking individuals' eligibility when their eligibility status changes. Immediately notifying the HCTC Program of changes in individuals' eligibility status decreases the number of individuals that are included in the state's HCTC End of Month Eligibility Review.

Upon receipt of an SWA's transmitted file, the HCTC system processes the file and attempts to load the records into the HCTC database. If, during the processing of the file, there are any errors with the file format or with an individual record, the system will generate an IB13 exception (error) report. The IB13 identifies the data discrepancy and indicates specifically why the record was not loaded. The HCTC Program transmits the IB13 back to the SWA via the ICON Interface. The SWA is responsible for correcting the discrepancy, regenerating an eligibility record, and retransmitting the record via the ICON Interface to the HCTC Program.

*SWA personnel must check daily to see if they received any IB13s from the HCTC Program.*

## IB13 Generation Process Flow



## IB13 Error Messages

The following table identifies specific IB13 syntax errors in an IB13 TAA/ATAA exception report. Not all fields in a transmitted record are required. The HCTC loader automatically generates an IB13 report if *required* fields are null (have no assigned value), or if *any* fields contain corrupt, incorrectly formatted, or otherwise invalid data.

Error Message	Field Name	Required / Not Required	Guidelines	Examples of Correct Data	Examples of Incorrect Data
SSN IS MISSING	Social Security Number (SSN)	Required	Must be 9 numeric characters	123456789	1234567890 12345678a
FIRST NAME IS MISSING	First Name	Required	Must be entered	Jane	(blank field)
LAST NAME IS MISSING	Last Name	Required	Must be entered	Smith	(blank field)
SUFFIX IS AN INVALID VALUE	Suffix of Name	Not Required	Acceptable values: JR, SR, I, II, III, IV, V, VI, VII	JR III	Junior 3 <sup>rd</sup>
DATE OF BIRTH IS AN INVALID VALUE	Date of Birth (DOB)	Not Required	Must be MMDDCCYY format. Otherwise, leave field blank	01151962 (blank field)	011567
ADDRESS LINE 1 IS MISSING	Address Line 1	Required	Must be entered	222 Main St or 222 12½ St.	(blank field)
STREET ADDR 1 IS BLANK BUT STREET ADDR 2 IS POPULATED	Address Line 2	Not Required	If entered, Address Line 1 must also be entered	Line 1: 222 Main St Line 2: Apt. 4	Line 1: (blank field) Line 2: 222 Main St
STREET ADDR 2 IS BLANK BUT STREET ADDR 3 IS POPULATED	Address Line 3	Not Required	If entered, both Address Line 1 and Address Line 2 must also be entered	Line 1: 222 Main St Line 2: Apt. 4 Line 3: 11 <sup>th</sup> Floor	Line 1: (blank field) Line 2: (blank field) Line 3: 222 Main St
CITY IS MISSING	City	Required	Must be entered	Boston	(blank field)
STATE IS MISSING OR STATE IS AN INVALID VALUE	State	Required	Must be entered as one of the 50 valid state abbreviations or Puerto Rico (PR), Guam (GM) Washington, DC (DC), or Virgin Islands (VI)	MA	(blank field) CD (for Canada) or any other invalid abbreviation
ZIP CODE IS AN INVALID VALUE OR ZIP CODE IS MISSING	Zip Code	Required	Must be entered with either 5 or 9 valid digits	12345, 123456789, 12345-6789, 123456789	(blank field)
INVALID ADJ CODE	Eligibility Adjustment Code (EAC)	Required	Must be entered as one of the 10 valid EAC codes listed to the right	00 10 20 21 22 23 24	001 17 28 45 32

**PLEASE NOTE:** Non-ASCII characters, including special characters (: ' ; : " \ { [ ] @ # \$ % ^ & \* ( ) = +), mainframe characters, and other format characters (hexadecimal, low values, binary characters, etc.) may NOT be used anywhere on ICON records and will generate an IB13 if used.

## Inbound ICON File Layout

The following pages specify the Header and Detail Record layout for data to be included in SWAs' inbound ICON files. The table below, *Header & Detail Record Layout*, outlines data requirements (Field Name, Length, and Position), defines key fields, and provides specifics about the file. The table on page 7, *Eligibility Adjustment Codes*, identifies the codes used to indicate an individual's eligibility status.

### Header & Detail Record Layout

Daily HCTC SWA (TAA/ATAA) Inbound File ( <i>Header Data Elements Format</i> )					
Field Name	Length	Position	Data Type	Required	Definition
Header Indicator	1	1	Alpha	Y	Indicates beginning of Header. Always an 'H'
State	2	2-3	Alpha	Y	State Abbreviation (e.g., Maryland (MD)) of SWA sending data
Message ID	6	4-9	Numeric	Y	Unique record Identifier automated by the state. Sequential counter that begins with a one (1) and continues until it reaches 999999
File Creation Date	8	10-17	Date	Y	Date the state creates the file and inputs record to ICON. In MMDDCCYY format
File Date	8	18-25	Date	Y	Date ICON compiles all of the states' data and sends it to HCTC. In MMDDCCYY format
Version Control No	4	26-29	Numeric	Y	Current version is 0001. Used to determine which file format was used to create the file
State Contact Name	60	30-89	Alpha	Y	Name of the person responsible for sending the files and is able to respond to questions
State Contact Phone No	10	90-99	Numeric	Y	Contact phone number of the above individual
File Source	2	100-101	Alpha	Y	File Source Code: 01 – TAA; 02 – ATAA; 03 – PBGC
Total Record Count	12	102-113	Numeric	Y	Total number of individual records in the body of the file. (If person is in the file multiple times, each record would add to the record count). Right justify, zero fill. <b>This number MUST match the number of records in the file, or it will generate an IB13.</b>
Space Filler	228	114-341	Numeric	Y	Line Filler: spaces only (no tabs)
Detail Indicator	1	1	Alpha	Y	Indicates beginning of Detail. Always 'D'
State	2	2-3	Alpha	Y	State Postal Code of SWA sending data
Message ID	6	4-9	Numeric	Y	Unique record identifier automated by the state. Sequential counter that begins with a one (1) and continues until it reaches 999999
Social Security Number	9	10-18	Numeric	Y	The individual's assigned social security number
First Name	25	19-43	Alpha	Y	The individual's first name
Middle Name	25	44-68	Alpha	N	The individual's middle name
Last Name	35	69-103	Alpha	Y	The individual's last name
Suffix	10	104-113	Alpha	N	Individual's suffix (e.g., Jr., IV, Sr.)

**Header & Detail Record Layout, cont.**

Daily HCTC SWA (TAA/ATAA) Inbound File ( <i>Detail Data Elements Format</i> )						
Field Name	Length	Position	Data Type	Required	HIPPA Compliant	Definition
Date of Birth	8	114-121	Date	N		Individual's date of birth in MMDDCCYY format
Street Address Line 1	55	122-176	Alpha/ Numeric	Y		First line of the individual's mailing address
Street Address Line 2	55	177-231	Alpha/ Numeric	N		Second line of the individual's mailing address (only if needed)
Street Line Address 3	55	232-286	Alpha/ Numeric	N		Third line of the individual's mailing address (only if needed)
City	30	287-316	Alpha	Y		Individual's mailing address city
State	2	317-319	Alpha	Y		State abbreviation (e.g., Maryland (MD)) of state where individual resides
Zip Code	15	319-333	Numeric	Y		Postal zip code- left justify, space fill. (The 15 characters is a HIPAA standard that is used to handle non USA based postal code. Zip code must be 5 or 9 numbers)
Eligibility Month/Year	6	334-339	Date	Y		The current month and year that the individual is qualified as either a TAA or ATAA recipient. Format is MMCCYY
Eligibility Adjustment Code	2	340-341	Numeric	Y		Values: " " (null value of 2 spaces), 00, 10, 20, 21, 22, 23, 24, 25) **See "Explanation of Eligibility Adjustment Code" on Page 8 of this document
File Specifications						
File load frequency	Daily, loaded at 6:00 PM EST (Monday – Friday only). <i>Contact the HCTC Program for holiday transmission schedule.</i>					
Code Set	ASCII					
File Format	Fixed field length					
File make-up	Contains data for TAA or ATAA individuals who are new to the HCTC Program, who remain eligible for TAA or ATAA for a new month, and/or who experience a change to their current or previous month eligibility status.					
Number of files per day per state	1 (Typically)					
Maximum number of records per file	100,000,000					
Number of states per file	Multiple					
Line Terminators	<CR><LF>					
End of Body Indicator	<ETX>					
End of File Indicator	<EOF>					
ASCII DEC Values	Character	Dec	Hex	Oct		
	CR	D(13)	D	015		
	LF	D(10)	A	012		
	ETX	D(3)	3	003		
	EOF	D(4)	4	004		

**NOTE: These file specifications are outlined in the US Department of Labor's Education and Training UIPL 24-03 Attachment B.**

## Eligibility Adjustment Codes (EAC)

Code	Definition	Use
00	<b>Current Determination of Eligibility</b>	To report an individual who meets the TAA or ATAA recipient criteria for the HCTC within the <b>current</b> month only. Multiple transactions for different periods of eligibility may occur within the same daily transmission, meaning to add or revoke past eligibility.
10	<b>Backdated Determination of Eligibility</b>	To report eligibility periods for <b>preceding</b> months not previously reported with a code 00 for TAA or ATAA recipients. A Code 10 is necessary when an individual's eligibility status for a previous month has changed due to appeals, review procedures, wage reconsideration, administrative errors, etc.

The following codes (20 – 25) should only be used when removing an individual's eligibility status for an **entire** month. NOTE: If an individual is determined to be TAA or ATAA ineligible for any portion of a month, but is deemed *eligible for at least one day* within that same month, the individual is still considered a TAA/ATAA-eligible recipient for HCTC for that entire month.

Code	Definition	Use
20	<b>Lost Eligibility Due to an Amended Eligibility Determination</b>	To report the loss of TAA or ATAA eligibility for an individual who was previously reported to HCTC as eligible for a month. For example, a revoked TRA/applicable UI entitlement makes the individual ineligible for HCTC for the previously reported month. NOTE: The Code 20 should only be used when one of the Lost Eligibility codes 2125 cannot be determined or if the SWA's database does not identify the specific causes of the lost eligibility.
21	<b>Lost Eligibility Due to an Administrative or Employer Error</b>	To report the loss of TAA or ATAA eligibility for an individual who was previously reported to HCTC as eligible for a month, <i>and</i> where the basis for the change resulted from agency error and/or erroneous information furnished by the employer (e.g., incorrect separation information, erroneous wages furnished by the employer, data entry errors made by the agency).
22	<b>Lost Eligibility Due to Claimant Error Without Willful Intent</b>	To report the loss of TAA or ATAA eligibility for an individual who was previously reported to HCTC as eligible for a month, but where a subsequent action by the individual <i>without willful intent</i> made him or her ineligible for a previous month. NOTE: <i>Without willful intent</i> indicates that the individual did not intentionally or deliberately misrepresent facts pertinent to his/her eligibility for that month. Examples include not reporting earnings correctly, failure to meet state's "able and available" laws, or failure to meet the state's work search requirements. Such intent will be determined in accordance with the applicable state law.
23	<b>Lost Eligibility Due to Claimant Error With Willful Intent</b>	To report the loss of TAA or ATAA eligibility for an individual who was previously reported to HCTC as eligible for a month, but where a subsequent action by the individual <i>with willful intent</i> made him or her ineligible for a previous month. NOTE: <i>With willful intent</i> indicates that the individual did intentionally and deliberately misrepresent facts pertinent to his/her eligibility. Such intent will be determined in accordance with the applicable state law.
24	<b>Lost Eligibility Due to Appeals Reversal</b>	To report the loss of TAA or ATAA eligibility for an individual who was previously reported to HCTC as eligible for a month, but lost eligibility due to an appeals reversal of the initial TAA or ATAA eligibility determination.



## Summary

SWAs should code their systems to the specifications outlined in this document to ensure that participants' eligibility records can be loaded into the HCTC system accurately and on time. By adhering to these standards, SWAs will improve the quality of the data transmitted to the HCTC Program, and better assist their TAA/ATAA customers by ensuring that they are efficiently and effectively able to participate in the HCTC Program.

The standards outlined in this document are subject to change; the HCTC Program will notify the Department of Labor and SWAs as changes occur. For questions or comments on this document, please contact the HCTC Program State Liaison Team at [HCTC.Program@irs.gov](mailto:HCTC.Program@irs.gov).

For questions on determining TRA eligibility, please contact US Department of Labor or your Regional office.